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NURSING CARE FOR THE MIDDLE CLASSES

Dear Editor: Much has been published on this subject in the *Journal*, but as it seems a hard problem to solve, I venture to relate some experiences I had during the influenza epidemic a year ago, which should throw some light on the subject. Our local Red Cross chapters are well organized, and have on hand supplies of all kinds. The Red Cross sales have been a "howling" success, yielding in some of our smallest towns thousands of dollars. It has become the custom for every person, young or old, rich or poor, to be a Red Cross member. Why should not this good work be continued, and supplies and funds always be in readiness, when needed, for the care and comfort of the sick in our own community? During the epidemic, when in almost every home one or more members were stricken with influenza, often followed by the dreaded pneumonia, our Red Cross furnished pneumonia jackets and often jellies and fruits. In one instance the mother of a family of five small children was ill for weeks. Two of the children were the first victims of influenza, and in caring for them, the mother, who was in the sixth month of pregnancy, was obliged to work far beyond her strength and finally was herself stricken with the disease. The neighbors were all willing to do any work outside, taking care of stock, etc., (these people were farmers), but none would venture inside to help care for the sick. The local Red Cross Chapter took the case in hand, found some one to do the washing, procured a nurse for the mother, and sent in supplies of various kinds, clothing for the expected baby, etc. Since these people can also be members of the Red Cross, they do not feel as though they are accepting charity. It is simply carrying out our President's idea of brotherly love. I happened to be the nurse called to this particular case, and know how grateful the mother felt, and what a different feeling she had toward the Red Cross when she found that they were glad to provide comforts for American mothers and children, as well as for those of France and Belgium. As great as the need is in devastated Europe, and as much as I have regretted that I was unable to minister to the sufferers "Over There," still I have found some comfort in the thought expressed in Miss Christianson's poem in the January *Journal*, and I feel that perhaps I have been of some use at home. I believe that if this matter were laid before the various Red Cross chapters, it would be favorably received and acted upon and would prove to be the solution of the long debated question, "How shall we procure nursing care for the middle classes?"

Iowa

S. X. S.

THE PRIVATE DUTY NURSE

Dear Editor: During all the years covered by the history of nursing, the private duty nurse has been an important factor, being indeed the first nurse whose efforts proved to the physician and to the public the value of nursing and who won from them the first recognition accorded nursing. It is not so long ago that there were no harmful germs, man had no appendix, and people could not be coaxed to a hospital except as a last chance. With the discovery of the germ theory of disease, the value of the possibilities of the hospital over the home became recognized and it was the private duty nurse who helped educate the public to that view. Even in the memory of some of us there has been great progress in the treatment and nursing of disease. I recall that only a few years ago, appendicitis was treated by hot compresses and rubbing to relieve pain, and after an operation, after pus had formed, the abdomen was irrigated, thus breaking down the protective wall that nature formed around the infection. With

like possibilities, a douche was often ordered three times a day after confinement. Diphtheria was just a chance membrane formed in the throat. Burns were dressed with flour, which became crusted, in removing the flour the tender new skin follicles were injured or destroyed. It has been the privilege of the nurse to demonstrate the value of securing rest and quiet for the sick, and to her more than to any one else has come the opportunity to educate the public with regard to cancer, tuberculosis, and infant care. She is in the home, knows the family more intimately than others and to her will be brought the seemingly small ailments, often so significant, but not considered of enough importance to report to a physician. To her instructions and influence may be ascribed a large place in the reduction of infant mortality in the rural districts. Also she has had much to do with securing a better class of applicants for the training schools; for coming into the home as she often does when there is great trouble, her efficient, cheerful and kindly way of handling the situation makes her the ideal of some young girl of the family and convinces her and her parents, that there is much more to nursing than the drudgery and few disagreeable duties that are always to be performed. We have accomplished much in the changed attitude of the public toward the hospital. When I began nursing, people would tell me they were so disappointed when the doctor had ordered a nurse, for they felt they had all they could do without waiting on a nurse. I have not heard that for a long time. People now depend on the nurse, they realize not only that the patient has better care, but also the routine of the household is less disturbed than with home care.

Kansas

ETHEL DILTS.

RANK FOR NURSES

I.

Dear Editor: It seems to me that something more than rank is needed, before women of training and intelligence and self respect can be asked to volunteer for service another time. Most of my service overseas was in Camp Hospital 42, at Bar-sur-Aube, France. We were very busy and had little time or opportunity for social life and our relations to the officers and enlisted men were almost entirely professional. They were always considerate and kind to us and we had nothing to complain of at any time. So it was a great surprise, when we were finally returned to our base, and soon afterward, sent home, to see the conditions existing between the nurses and the officers of the Army. The trip home was a series of insults, humiliations and exasperations, from our assignment of rooms, on the sixth, seventh, and eighth decks below the state rooms of the officers on board, to the bitter and unkind remarks that were constantly made about the nurses. Finally, when we reached New York City, we were obliged to wait three hours on the wharf, while ambulances came and carried off the last officer on board. Then we walked several blocks, carrying more or less heavy luggage, to the Polyclinic Hospital, and only a few of us had been given time to get our breakfast before leaving the ship. In New York we were treated as nuisances wherever we went. Not once did I see a sign of welcome to the women who had gone with the Army, though the city was all afutter with welcomes to the Soldiers, Sailors and Marines. At last we were given our discharge and tickets home, and time to think it all over and wonder just why the Army woman was so unpopular. If several thousand women left this country, followed the Army to France, and then came home, despised, insulted, unhonored, then a part of the blame must rest upon the women themselves! As is always the case, the quiet,